Office of Administration

Commissioner's Office

"Request for Preauthorization for Other Services"

Contractor: N Subcontracto				
item to be pu	below the information for each rchased, cost for the item, and rovided to be reimbursed.	the justification. Ite	purchased. List the date of purchase, ms must be approved before Enrolled:	
Client Name		Date	Enrolled:	
Proposed Purchase Date	ltem	Total Cost (include formal estimate from provider of services)	Justification, include other sources of funding that have been attempted	
11/1/17	Acceptance.	\$350	Car physical construction of all the constructions of all the constructions of the constructi	
AMOUNT TO	BE REIMBURSED	\$3.00	1 1 4.	
Please return to Alternatives to Abortion Program Manager, State of Missouri - Office of Administration, Commissioner's Office, State Capital Building, Room, 125, Jefferson City, MO 65101. May be foxed to 573/751-1212 or emailed to emily.kraft@oa.mo.gov by the Contractor only! Thank you. Authorized person requesting purchase: Approved for purchase: Date 1117				
Purchase denied:Date				
Reason for denying purchase:				

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0.00 0.00 2,750.00	Gateway Acceptance Rogular Parmont Ledger Card Run By JKAMINSKI o Total Balance: Total Ant Due: Contractual Past Due: Accrused Interest: Prin Balance: Tax Poid: Sant Due Acceptance: Acce
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